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|------------------------------------------------------------------------------------------------------------|-----------------------|------------------------|------|
| <b>TRANSMITTAL FORM</b><br><i>(to be used for all correspondence during pendency of filed application)</i> | Application Number    | 09/289,550             |      |
|                                                                                                            | Filing Date           | April 9, 1999          |      |
|                                                                                                            | First Named Inventor  | Richard W. Friesen     |      |
|                                                                                                            | Group Art Unit Number | 2773                   |      |
|                                                                                                            | Examiner Name         | Not Yet Known          |      |
| Total Number of Pages in This Submission                                                                   | 11                    | Attorney Docket Number | 3854 |

| ENCLOSURES (check all that apply)                                                                                               |                                                                                               |
|---------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Fee Transmittal Form (in duplicate)<br><input type="checkbox"/> Check Enclosed              | <input type="checkbox"/> Issue Fee Transmittal                                                |
| <input checked="" type="checkbox"/> Return Receipt Postcard                                                                     | <input type="checkbox"/> Letter to Chief Draftsperson                                         |
| <input type="checkbox"/> Response to Notice to File Missing Parts                                                               | <input type="checkbox"/> Formal Drawing(s):<br>[ ] Sheet(s) of Figure(s)                      |
| <input type="checkbox"/> Assignment & Recordation Cover Sheet                                                                   | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences           |
| <input type="checkbox"/> Declaration                                                                                            | <input type="checkbox"/> Appeal Communication to Group<br>(Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> Small Entity Statement                                                                                 | <input type="checkbox"/> Certified Copy of Priority Document(s)                               |
| <input type="checkbox"/> Information Disclosure Statement & PTO-1449<br><input type="checkbox"/> Copies of IDS Cited References | <input type="checkbox"/> After Allowance Communication to Group                               |
| <input checked="" type="checkbox"/> Request for Corrected Filing Receipt                                                        | <input type="checkbox"/>                                                                      |
| <input type="checkbox"/> Request for Correction of Recorded Assignment                                                          | <input type="checkbox"/>                                                                      |
| <input type="checkbox"/> Amendment/Response: [ ] Page(s)<br><input type="checkbox"/> After Final                                | <input type="checkbox"/>                                                                      |
| <input type="checkbox"/> Status Request                                                                                         | <input type="checkbox"/>                                                                      |
| <input type="checkbox"/> Revocation and Power of Attorney                                                                       | <input type="checkbox"/>                                                                      |
| REMARKS:                                                                                                                        |                                                                                               |

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| SIGNATURE OF ATTORNEY OR AGENT |                             |        |         |
|--------------------------------|-----------------------------|--------|---------|
| Signature:                     |                             |        |         |
| Attorney/Reg. No.:             | Dana S. Rao/Reg. No. 43,875 | Dated: | 6/23/99 |

| CERTIFICATE OF MAILING                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |             |        |         |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--------|---------|
| I hereby certify that this correspondence, including the enclosures identified above, is being deposited with the United States Postal Service as first class mail in an envelope addressed to: The Assistant Commissioner for Patents, Washington, D.C. 20231 on the date shown below. If the Express Mail Mailing Number is filled in below, then this correspondence is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service pursuant to 37 CFR 1.10. |             |        |         |
| Signature:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |             |        |         |
| Typed or Printed Name:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Dana S. Rao | Dated: | 6/23/99 |
| Express Mail Mailing Number (optional):                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |             |        |         |

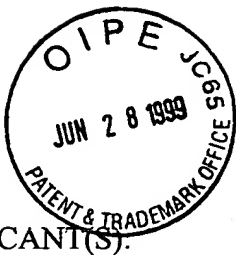


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|-----------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|--------------------------|--------------------|
| 06/22/PTO(modified)<br>Rev. 10/95                                                                                           | U.S. Department of Commerce<br>Patent and Trademark Office | <b>Complete if Known</b> |                    |
| <b>FEE TRANSMITTAL</b><br><br><b>TOTAL AMOUNT OF PAYMENT</b><br>Subtotal (1) + Subtotal (2) + Subtotal (3) = <b>(\$).00</b> |                                                            | Application Number       | 09/289,550         |
|                                                                                                                             |                                                            | Filing Date              | April 9, 1999      |
|                                                                                                                             |                                                            | First Named Inventor     | Richard W. Friesen |
|                                                                                                                             |                                                            | Group Art Unit           | 2773               |
|                                                                                                                             |                                                            | Examiner Name            | Not Yet Known      |
|                                                                                                                             |                                                            | Attorney Docket Number   | 3854               |

| METHOD OF PAYMENT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                              | FEE CALCULATION (continued)                                                                                                                                                                                                                             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| <b>1. The Commissioner is hereby authorized to:</b><br><br><input type="checkbox"/> Charge the indicated fees to the below mentioned deposit account.<br><br><input checked="" type="checkbox"/> Charge any additional fee required under 37 CFR 1.16 - 1.21 or credit any over payments to the below mentioned deposit account. †<br><br><input type="checkbox"/> Charge the Issue Fee set in 37 CFR 1.18 at the Mailing of the Notice of Allowance, 37 CFR 1.311(b) to the below mentioned deposit account.<br><br>Deposit Account Number: 19-2555<br>Deposit Account Name: FENWICK & WEST LLP<br><br>A Duplicate Copy of this authorization is attached<br><br><b>2. <input type="checkbox"/> Payment Enclosed:</b><br>[ ] Check [ ] Other |                              | <b>3. ADDITIONAL FEES</b><br><table border="1"><thead><tr><th>Large Entity<br/>Fee Code/Fee</th><th>Small Entity<br/>Fee Code/Fee</th><th>Fee Description</th><th>Fee Due</th></tr></thead><tbody><tr><td>105/\$130</td><td>205/\$65</td><td>Surcharge - late filing fee or oath</td><td><input type="checkbox"/></td></tr><tr><td>127/\$50</td><td>227/\$25</td><td>Surcharge-late provisional filing fee or cover sheet</td><td><input type="checkbox"/></td></tr><tr><td>147/\$2,520</td><td>147/\$2,520</td><td>For filing a request for reexamination</td><td><input type="checkbox"/></td></tr><tr><td>115/\$110</td><td>215/\$55</td><td>Extension for response within first month†</td><td><input type="checkbox"/></td></tr><tr><td>116/\$380</td><td>216/\$190</td><td>Extension for response within second month†</td><td><input type="checkbox"/></td></tr><tr><td>117/\$870</td><td>217/\$435</td><td>Extension for response within third month†</td><td><input type="checkbox"/></td></tr><tr><td>118/\$1,360</td><td>218/\$680</td><td>Extension for response within fourth month†</td><td><input type="checkbox"/></td></tr><tr><td>128/\$1,850</td><td>228/\$925</td><td>Extension for response within fifth month†</td><td><input type="checkbox"/></td></tr><tr><td>119/\$300</td><td>219/\$150</td><td>Notice of Appeal</td><td><input type="checkbox"/></td></tr><tr><td>141/\$1,210</td><td>241/\$605</td><td>Petition to revive unintentionally abandoned application</td><td><input type="checkbox"/></td></tr><tr><td>142/\$1,210</td><td>242/\$605</td><td>Utility Issue Fee (Or Reissue)</td><td><input type="checkbox"/></td></tr><tr><td>143/\$430</td><td>243/\$215</td><td>Design Issue Fee</td><td><input type="checkbox"/></td></tr><tr><td>122/\$130</td><td>122/\$130</td><td>Petitions to the Commissioner</td><td><input type="checkbox"/></td></tr><tr><td>123/\$50</td><td>123/\$50</td><td>Petitions related to provisional applications</td><td><input type="checkbox"/></td></tr><tr><td>126/\$240</td><td>126/\$240</td><td>Submission of Information Disclosure Statement</td><td><input type="checkbox"/></td></tr><tr><td>581/\$40</td><td>581/\$40</td><td>Recording each patent assignment per property (times number of properties)</td><td><input type="checkbox"/></td></tr><tr><td>146/\$760</td><td>246/\$380</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td><input type="checkbox"/></td></tr><tr><td>149/\$760</td><td>249/\$380</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td><input type="checkbox"/></td></tr><tr><td colspan="2">Other fee (specify):</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr><tr><td colspan="2">Other fee (specify):</td><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr><tr><td colspan="2"></td><td><b>SUBTOTAL (3)</b></td><td><b>(\$).00</b></td></tr></tbody></table> |                              | Large Entity<br>Fee Code/Fee | Small Entity<br>Fee Code/Fee | Fee Description | Fee Due                | 105/\$130      | 205/\$65                 | Surcharge - late filing fee or oath | <input type="checkbox"/> | 127/\$50      | 227/\$25                 | Surcharge-late provisional filing fee or cover sheet | <input type="checkbox"/> | 147/\$2,520                                     | 147/\$2,520              | For filing a request for reexamination | <input type="checkbox"/>                                | 115/\$110          | 215/\$55                 | Extension for response within first month† | <input type="checkbox"/> | 116/\$380      | 216/\$190 | Extension for response within second month† | <input type="checkbox"/> | 117/\$870 | 217/\$435 | Extension for response within third month† | <input type="checkbox"/> | 118/\$1,360 | 218/\$680                                          | Extension for response within fourth month† | <input type="checkbox"/> | 128/\$1,850 | 228/\$925 | Extension for response within fifth month† | <input type="checkbox"/> | 119/\$300 | 219/\$150 | Notice of Appeal | <input type="checkbox"/> | 141/\$1,210 | 241/\$605 | Petition to revive unintentionally abandoned application | <input type="checkbox"/> | 142/\$1,210 | 242/\$605 | Utility Issue Fee (Or Reissue) | <input type="checkbox"/> | 143/\$430 | 243/\$215 | Design Issue Fee | <input type="checkbox"/> | 122/\$130 | 122/\$130 | Petitions to the Commissioner | <input type="checkbox"/> | 123/\$50 | 123/\$50 | Petitions related to provisional applications | <input type="checkbox"/> | 126/\$240 | 126/\$240 | Submission of Information Disclosure Statement | <input type="checkbox"/> | 581/\$40 | 581/\$40 | Recording each patent assignment per property (times number of properties) | <input type="checkbox"/> | 146/\$760 | 246/\$380 | Filing a submission after final rejection (37 CFR 1.129(a)) | <input type="checkbox"/> | 149/\$760 | 249/\$380 | For each additional invention to be examined (37 CFR 1.129(b)) | <input type="checkbox"/> | Other fee (specify): |  | <input type="checkbox"/> | <input type="checkbox"/> | Other fee (specify): |  | <input type="checkbox"/> | <input type="checkbox"/> |  |  | <b>SUBTOTAL (3)</b> | <b>(\$).00</b> |
| Large Entity<br>Fee Code/Fee                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Small Entity<br>Fee Code/Fee | Fee Description                                                                                                                                                                                                                                         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| 105/\$130                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 205/\$65                     | Surcharge - late filing fee or oath                                                                                                                                                                                                                     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| 127/\$50                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 227/\$25                     | Surcharge-late provisional filing fee or cover sheet                                                                                                                                                                                                    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| 147/\$2,520                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 147/\$2,520                  | For filing a request for reexamination                                                                                                                                                                                                                  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| 115/\$110                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 215/\$55                     | Extension for response within first month†                                                                                                                                                                                                              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| 116/\$380                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 216/\$190                    | Extension for response within second month†                                                                                                                                                                                                             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| 117/\$870                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 217/\$435                    | Extension for response within third month†                                                                                                                                                                                                              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| 118/\$1,360                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 218/\$680                    | Extension for response within fourth month†                                                                                                                                                                                                             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| 128/\$1,850                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 228/\$925                    | Extension for response within fifth month†                                                                                                                                                                                                              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| 119/\$300                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 219/\$150                    | Notice of Appeal                                                                                                                                                                                                                                        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| 141/\$1,210                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 241/\$605                    | Petition to revive unintentionally abandoned application                                                                                                                                                                                                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| 142/\$1,210                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 242/\$605                    | Utility Issue Fee (Or Reissue)                                                                                                                                                                                                                          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| 143/\$430                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 243/\$215                    | Design Issue Fee                                                                                                                                                                                                                                        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| 122/\$130                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 122/\$130                    | Petitions to the Commissioner                                                                                                                                                                                                                           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| 123/\$50                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 123/\$50                     | Petitions related to provisional applications                                                                                                                                                                                                           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| 126/\$240                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 126/\$240                    | Submission of Information Disclosure Statement                                                                                                                                                                                                          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| 581/\$40                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 581/\$40                     | Recording each patent assignment per property (times number of properties)                                                                                                                                                                              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| 146/\$760                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 246/\$380                    | Filing a submission after final rejection (37 CFR 1.129(a))                                                                                                                                                                                             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| 149/\$760                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 249/\$380                    | For each additional invention to be examined (37 CFR 1.129(b))                                                                                                                                                                                          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| Other fee (specify):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                              | <input type="checkbox"/>                                                                                                                                                                                                                                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| <b>1. FILING FEE</b><br><table border="1"><thead><tr><th>Large Entity<br/>Fee Code/Fee</th><th>Small Entity<br/>Fee Code/Fee</th><th>Fee Description</th><th>Fee Due</th></tr></thead><tbody><tr><td>101/\$760</td><td>201/\$380</td><td>Utility Filing</td><td><input type="checkbox"/></td></tr><tr><td>106/\$310</td><td>206/\$155</td><td>Design Filing</td><td><input type="checkbox"/></td></tr><tr><td>108/\$760</td><td>208/\$380</td><td>Reissue Filing</td><td><input type="checkbox"/></td></tr><tr><td>114/\$150</td><td>214/\$75</td><td>Provisional Filing</td><td><input type="checkbox"/></td></tr><tr><td colspan="2"><b>SUBTOTAL (1)</b></td><td><b>(\$).00</b></td><td></td></tr></tbody></table>                          |                              | Large Entity<br>Fee Code/Fee                                                                                                                                                                                                                                    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                         | <input type="checkbox"/> | 114/\$150                              | 214/\$75                                                | Provisional Filing | <input type="checkbox"/> | <b>SUBTOTAL (1)</b>                        |                          | <b>(\$).00</b> |           |                                             |                          |           |           |                                            |                          |             |                                                    |                                             |                          |             |           |                                            |                          |           |           |                  |                          |             |           |                                                          |                          |             |           |                                |                          |           |           | 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| Large Entity<br>Fee Code/Fee                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Small Entity<br>Fee Code/Fee | Fee Description                                                                                                                                                                                                                                         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| 101/\$760                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 201/\$380                    | Utility Filing                                                                                                                                                                                                                                          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| 106/\$310                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 206/\$155                    | Design Filing                                                                                                                                                                                                                                           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| 114/\$150                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 214/\$75                     | Provisional Filing                                                                                                                                                                                                                                      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| <b>SUBTOTAL (1)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                              | <b>(\$).00</b>                                                                                                                                                                                                                                          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| <b>2. CLAIMS</b><br><table border="1"><thead><tr><th>Large Entity<br/>Fee Code/Fee</th><th>Small Entity<br/>Fee Code/Fee</th><th>Fee Description</th></tr></thead><tbody><tr><td>103/\$18</td><td>203/\$9</td><td>Claims in excess of 20</td></tr><tr><td>102/\$78</td><td>202/\$39</td><td>Independent claims in excess of 3</td></tr><tr><td>104/\$260</td><td>204/\$130</td><td>Multiple dependent claim</td></tr><tr><td>109/\$78</td><td>209/\$39</td><td>Reissue independent claims over original patent</td></tr><tr><td>110/\$18</td><td>210/\$9</td><td>Reissue claims in excess of 20 and over original patent</td></tr></tbody></table>                                                                                            |                              | Large Entity<br>Fee Code/Fee                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Small Entity<br>Fee Code/Fee | Fee Description              | 103/\$18                     | 203/\$9         | Claims in excess of 20 | 102/\$78       | 202/\$39                 | Independent claims in excess of 3   | 104/\$260                | 204/\$130     | Multiple dependent claim | 109/\$78                                             | 209/\$39                 | Reissue independent claims over original patent | 110/\$18                 | 210/\$9                                | Reissue claims in excess of 20 and over original patent |                    |                          |                                            |                          |                |           |                                             |                          |           |           |                                            |                          |             |                                                    |                                             |                          |             |           |                                            |                          |           |           |                  |                          |             |           |                                                          |                          |             |           |                                |                          |           |          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| Large Entity<br>Fee Code/Fee                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Small Entity<br>Fee Code/Fee | Fee Description                                                                                                                                                                                                                                         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| 103/\$18                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 203/\$9                      | Claims in excess of 20                                                                                                                                                                                                                                  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| 102/\$78                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 202/\$39                     | Independent claims in excess of 3                                                                                                                                                                                                                       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| 104/\$260                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 204/\$130                    | Multiple dependent claim                                                                                                                                                                                                                                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| 109/\$78                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 209/\$39                     | Reissue independent claims over original patent                                                                                                                                                                                                         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| 110/\$18                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 210/\$9                      | Reissue claims in excess of 20 and over original patent                                                                                                                                                                                                 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|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                              | <table border="1"><thead><tr><th colspan="2">(Col. 1)</th><th colspan="2">(Col. 2)</th><th colspan="2">(Col. 3)</th><th rowspan="2">Fee</th><th rowspan="2">Fee Due</th></tr><tr><th>For</th><th>No. of Existing Claims</th><th colspan="2">Highest No. Previously Paid For</th><th>Extra**</th></tr></thead><tbody><tr><td>TOTAL</td><td></td><td>minus*</td><td>20 or</td><td>=</td><td></td><td>x</td><td>=</td></tr><tr><td>INDEP</td><td></td><td>minus*</td><td>3 or</td><td>=</td><td></td><td>x</td><td>=</td></tr><tr><td colspan="8">[ ] First presentation of multiple dependent claim</td></tr></tbody></table>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      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                                 | TOTAL                    |                                        | minus*                                                  | 20 or              | =                        |                                            | x                        | =              | INDEP     |                                             | minus*                   | 3 or      | =         |                                            | x                        | =           | [ ] First presentation of multiple dependent claim |                                             |                          |             |           |                                            |                          |           |           |                  |                          |             |           |                                                          |                          |             |           |                                |                          |           |           |                  |                          |           |           |                               |                          |          |          |                                               |                          |           |           |                                                |                          |          |          |                                                                            |                          |           |           |                                                             |                          |           |           |                                                                |                          |                      |  |                          |                          |                      |  |                          |                          |  |  |                     |                |
| (Col. 1)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                              | (Col. 2)                                                                                                                                                                                                                                                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| [ ] First presentation of multiple dependent claim                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                              |                                                                                                                                                                                                                                                         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|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                              | * Subtract the greater number of Col. 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                              | <b>SUBTOTAL (2)</b>          |                              | <b>(\$).00</b>  |                        |                |                          |                                     |                          |               |                          |                                                      |                          |                                                 |                          |                                        |                                                         |                    |                          |                                            |                          |                |           |                                             |                          |           |           |                                            |                          |             |                                                    |                                             |                          |             |           |                                            |                          |           |           |                  |                          |             |           |                                                          |                          |             |           |                                |                          |           |     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|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                              | ** If the difference between Col. 1 and Col. 2 is less than zero, then enter "0" in Col. 3                                                                                                                                                              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|                       |             |                                 |         |
|-----------------------|-------------|---------------------------------|---------|
| <b>SUBMITTED BY</b>   |             | <b>Complete (if applicable)</b> |         |
| Typed or Printed Name | Dana S. Rao | Reg. Number                     | 43,875  |
| Signature             |             | Date                            | 6/23/99 |

† Request for Extension of Time per 37 CFR 1.136 (a)(3) made hereby



IN THE UNITED STATES  
PATENT AND TRADEMARK OFFICE

APPLICANT(S): Richard W. Friesen and Peter C. Hart  
SERIAL NO.: 09/289,550  
FILING DATE: April 9, 1999  
TITLE: User Interface for an Electronic Trading System  
EXAMINER: Not Yet Known  
GROUP ART UNIT: 2773  
ATTY. DKT. NO.: 3854

RECEIVED  
JUN - 4 2000  
TO 2100 MAIL ROOM

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner For Patents, Washington, D.C. 20231, on the date shown below:

Dated: 6/23/99 By: [Signature]  
Dana S. Rao, Reg. No.: 43,875

ASSISTANT COMMISSIONER FOR PATENTS  
APPLICATION PROCESSING DIVISION  
CUSTOMER CORRECTION BRANCH  
WASHINGTON, DC. 20231

**REQUEST FOR CORRECTED FILING RECEIPT**

SIR:

Enclosed is a copy of the Official Filing Receipt. It contains the following errors:

1. The total number of drawings is erroneously stated as 13. The correct total number of drawings is 14, as evidenced by our postcard, a copy of which is enclosed.
2. The number of total claims is erroneously stated as 38. The correct number of total claims is 58, as evidenced by the fee transmittal, a copy of which is enclosed.
3. The Applicant's name is erroneously stated as "Richard Friesen". The correct Applicant's name is "Richard W. Friesen" as evidenced by the executed Declaration, a copy of which is enclosed.

4. The city of residence for Applicant Peter C. Hart is erroneously stated as "San Rafacl". The correct Applicant's city of residence is "San Rafael" as evidenced by the executed Declaration, a copy of which is enclosed.

Please issue a corrected Filing Receipt rectifying these errors.

☒ The corrections are not due to any error by the Applicant and therefore no fee is due.

☐ Since at least one of the corrections is due to Applicant's error, payment in the amount of \$25, pursuant to 37 CFR § 1.19(h), is enclosed.

Respectfully submitted,  
RICHARD W. FRIESEN and  
PETER C. HART

Dated: 6/23/99

By: 

Dana S. Rao, Reg. No.: 43,875  
Fenwick & West LLP  
Two Palo Alto Square  
Palo Alto, CA 94306  
Tel.: (650) 858-7816  
Fax.: (650) 494-1417

FILING RECEIPT  
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UNITED STATES DEPARTMENT OF COMMERCE  
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**COPY**

| APPLICATION NUMBER | FILING DATE | GRP ART UNIT | FIL FEE REC'D | ATTORNEY DOCKET NO. | DRWGS | TOT CL | IND CL |
|--------------------|-------------|--------------|---------------|---------------------|-------|--------|--------|
| 09/289,550         | 04/09/99    | 2773         | \$1,138.00    | 3854                | 13    | 38     | 12     |

DANA S RAO  
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PALO ALTO CA 94306



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JUN 14 1999

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Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Application Processing Division's Customer Correction Branch within 10 days of receipt. Please provide a copy of the Filing Receipt with the changes noted thereon.

Applicant(s)

RICHARD FRIESEN, FAIRFAX, CA; PETER C. HART, SAN RAFAEL, CA.

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 04/28/99 \*\* SMALL ENTITY \*\*  
TITLE

USER INTERFACE FOR AN ELECTRONIC TRADING SYSTEM

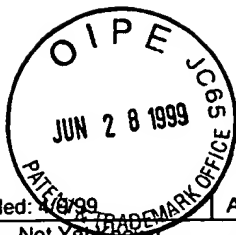
PRELIMINARY CLASS: 345

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TC 2700 MAIL ROOM

DATA ENTRY BY: FORD, EVELYN

TEAM: 04 DATE: 06/10/99





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Date Mailed: 4/9/99 Atty/Sec: DSR/dkc Filing Date: 4/9/99

Serial No. Not Yet Known


Docket No.: 3854

Applicant(s): Richard W. Friesen and Peter C. Hart

Title: User Interface for an Electronic Trading System

Please imprint Patent Office "date stamp" hereon to indicate receipt and then return card to addressee

- |                                                                                   |                                                                      |
|-----------------------------------------------------------------------------------|----------------------------------------------------------------------|
| <input checked="" type="checkbox"/> 46 pages of Specification, Claims, & Abstract | <input type="checkbox"/> Amendment/Response                          |
| <input checked="" type="checkbox"/> 14 sheets of formal drawings                  | <input type="checkbox"/> PTO-1533 & Resp. to Notice Of Missing Parts |
| <input type="checkbox"/> Provisional Application Cover Sheet                      | <input type="checkbox"/> Request to Correct Filing Receipt           |
| <input checked="" type="checkbox"/> New Utility Application Transmittal           | <input type="checkbox"/> Request to Correct Assignment               |
| <input checked="" type="checkbox"/> Fee Transmittal (in duplicate)                | <input type="checkbox"/> IDS, PTO-1449, and cited references         |
| <input checked="" type="checkbox"/> Declaration                                   | <input type="checkbox"/> Issue Fee Transmittal                       |
| <input type="checkbox"/> Assignment & Recordation Cover Sheet                     | <input type="checkbox"/> Letter to Chief Draftsperson                |
| <input checked="" type="checkbox"/> Small Entity Statement                        | <input type="checkbox"/> Maintenance Fee Payment                     |
| <input type="checkbox"/> New Design Application Transmittal                       | <input type="checkbox"/> Request for Certificate of Correction       |
| <input type="checkbox"/> CPA Request Transmittal                                  | <input type="checkbox"/> Notice of Appeal                            |
| <input type="checkbox"/> Check in the amount of \$ _                              | <input checked="" type="checkbox"/> Express Mail No. EL263549029US   |

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09/289550  
  
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PTO/SB/17 (6-95)(modified)  
Approved for use through 11/30/96. OMB 0651-0032  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

0002/PTO (modified) U.S. Department of Commerce  
Rev. 6/95 Patent and Trademark Office

## FEE TRANSMITTAL

### TOTAL AMOUNT OF PAYMENT

Subtotal (1) + Subtotal (2) + Subtotal (3) = **(\$1,073.00)**

| Complete if Known      |                    |
|------------------------|--------------------|
| Application Number     | Not Yet Known      |
| Filing Date            | April 9, 1999      |
| First Named Inventor   | Richard W. Friesen |
| Group Art Unit         | Not Yet Known      |
| Examiner Name          | Not Yet Known      |
| Attorney Docket Number | 3854               |

| METHOD OF PAYMENT | FEE CALCULATION (continued) |
|-------------------|-----------------------------|
|-------------------|-----------------------------|

#### 1. The Commissioner is hereby authorized to:

- ☐ Charge the indicated fees to the below mentioned deposit account.
- ☐ Charge any additional fee required under 37 CFR 1.16 - 1.21 or credit any over payments to the below mentioned deposit account. <sup>1</sup>
- ☐ Charge the Issue Fee set in 37 CFR 1.18 at the Mailing of the Notice of Allowance. 37 CFR 1.311(b) to the below mentioned deposit account.

Deposit Account Number: 19-2555

Deposit Account Name: FENWICK & WEST LLP

A Duplicate Copy of this authorization is attached

2. ☐ Payment Enclosed:  
[ ] Check [ ] Other

#### FEE CALCULATION (fees effective 11/12/98)

##### 1. FILING FEE

| Large Entity<br>Fee Code/Fee | Small Entity<br>Fee Code/Fee | Fee Description    | Fee Due                              |
|------------------------------|------------------------------|--------------------|--------------------------------------|
| 101/\$760                    | 201/\$380                    | Utility Filing     | <input type="text" value="380"/>     |
| 108/\$310                    | 206/\$155                    | Design Filing      | <input type="text"/>                 |
| 108/\$760                    | 208/\$380                    | Reissue Filing     | <input type="text"/>                 |
| 114/\$150                    | 214/\$75                     | Provisional Filing | <input type="text"/>                 |
| SUBTOTAL (1)                 |                              |                    | <input type="text" value="(\$380)"/> |

##### 2. CLAIMS

| Large Entity<br>Fee Code/Fee | Small Entity<br>Fee Code/Fee | Fee Description                                         |
|------------------------------|------------------------------|---------------------------------------------------------|
| 103/\$18                     | 203/\$9                      | Claims in excess of 20                                  |
| 102/\$78                     | 202/\$39                     | Independent claims in excess of 3                       |
| 104/\$260                    | 204/\$130                    | Multiple dependent claim                                |
| 109/\$78                     | 209/\$39                     | Reissue independent claims over original patent         |
| 110/\$18                     | 210/\$9                      | Reissue claims in excess of 20 and over original patent |

##### 3. ADDITIONAL FEES

| Large Entity<br>Fee Code/Fee | Small Entity<br>Fee Code/Fee | Fee Description                                                            | Fee Due                              |
|------------------------------|------------------------------|----------------------------------------------------------------------------|--------------------------------------|
| 105/\$130                    | 205/\$65                     | Surcharge - late filing fee or oath                                        | <input type="text"/>                 |
| 127/\$50                     | 227/\$25                     | Surcharge-late provisional filing fee or cover sheet                       | <input type="text"/>                 |
| 147/\$2,520                  | 147/\$2,520                  | For filing a request for reexamination                                     | <input type="text"/>                 |
| 115/\$110                    | 215/\$55                     | Extension for response within first month <sup>1</sup>                     | <input type="text"/>                 |
| 116/\$380                    | 216/\$190                    | Extension for response within second month <sup>1</sup>                    | <input type="text"/>                 |
| 117/\$870                    | 217/\$435                    | Extension for response within third month <sup>1</sup>                     | <input type="text"/>                 |
| 118/\$1,380                  | 218/\$680                    | Extension for response within fourth month <sup>1</sup>                    | <input type="text"/>                 |
| 128/\$1,850                  | 228/\$925                    | Extension for response within fifth month <sup>1</sup>                     | <input type="text"/>                 |
| 119/\$300                    | 219/\$150                    | Notice of Appeal                                                           | <input type="text"/>                 |
| 141/\$1,210                  | 241/\$605                    | Petition to revive unintentionally abandoned application                   | <input type="text"/>                 |
| 142/\$1,210                  | 242/\$605                    | Utility Issue Fee (Or Reissue)                                             | <input type="text"/>                 |
| 143/\$430                    | 243/\$215                    | Design Issue Fee                                                           | <input type="text"/>                 |
| 122/\$130                    | 122/\$130                    | Petitions to the Commissioner                                              | <input type="text"/>                 |
| 123/\$50                     | 123/\$50                     | Petitions related to provisional applications                              | <input type="text"/>                 |
| 126/\$240                    | 126/\$240                    | Submission of Information Disclosure Statement                             | <input type="text"/>                 |
| 581/\$40                     | 581/\$40                     | Recording each patent assignment per property (times number of properties) | <input type="text"/>                 |
| 146/\$760                    | 246/\$380                    | Filing a submission after final rejection (37 CFR 1.129(a))                | <input type="text"/>                 |
| 149/\$760                    | 249/\$380                    | For each additional invention to be examined (37 CFR 1.129(b))             | <input type="text"/>                 |
| Other fee (specify):         |                              |                                                                            | <input type="text"/>                 |
| Other fee (specify):         |                              |                                                                            | <input type="text"/>                 |
| SUBTOTAL (3)                 |                              |                                                                            | <input type="text" value="(\$).00"/> |

| (Col. 1)                                           |                        | (Col. 2) |                                 | (Col. 3) |         | Fee  | Fee Due |
|----------------------------------------------------|------------------------|----------|---------------------------------|----------|---------|------|---------|
| For                                                | No. of Existing Claims | minus*   | Highest No. Previously Paid For | =        | Extra** |      |         |
| TOTAL                                              | 58                     | minus*   | 20 or                           | =        | 38      | x 9  | = 342   |
| INDEP                                              | 12                     | minus*   | 3 or                            | =        | 9       | x 39 | = 351   |
| [ ] First presentation of multiple dependent claim |                        |          |                                 |          |         |      |         |

\* Subtract the greater number of Col. 2

\*\* If the difference between Col. 1 and Col. 2 is less than zero, then enter "0" in Col. 3

SUBTOTAL (2)

| SUBMITTED BY          |             | Complete (if applicable) |        |
|-----------------------|-------------|--------------------------|--------|
| Typed or Printed Name | Dana S. Rao | Reg. Number              | 43,875 |
| Signature             |             | Date                     | 4/9/99 |

<sup>1</sup> Request for Extension of Time per 37 CFR 1.136 (a)(3) made hereby





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PTO/SB/01 (6-95) (modified)  
Approved for use through 10/31/96 OMB 0651-0032  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

|                                                                                                                                                                                                                                                                                                                                                   |                        |                    |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|--------------------|
| <b>0010/PTO</b><br>Rev. 6/95<br><br><b>U.S. Department of Commerce</b><br>Patent and Trademark Office<br><br><b>DECLARATION FOR<br/>UTILITY OR DESIGN<br/>PATENT APPLICATION</b><br><br><input type="checkbox"/> Declaration Submitted with Initial Filing      OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing | Attorney Docket Number | 3854               |
|                                                                                                                                                                                                                                                                                                                                                   | First Named Inventor   | Richard W. Friesen |
|                                                                                                                                                                                                                                                                                                                                                   | COMPLETE IF KNOWN      |                    |
|                                                                                                                                                                                                                                                                                                                                                   | Application Number     | 09/289,550         |
|                                                                                                                                                                                                                                                                                                                                                   | Filing Date            | April 9, 1999      |
|                                                                                                                                                                                                                                                                                                                                                   | Group Art Unit         | 2773               |
|                                                                                                                                                                                                                                                                                                                                                   | Examiner Name          | Not Yet Known      |

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**USER INTERFACE FOR AN ELECTRONIC TRADING SYSTEM**

the specification of which (Title of the Invention)

☐ is attached hereto  
OR

☒ was filed on (MM/DD/YYYY) April 9, 1999 as United States Application Number or PCT International Application Number 09/289,550 and was amended on (MM/DD/YYYY) [ ] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations. § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code § 119 (a)-(d) or § 385(b) of any foreign application(s) for patent or inventor's certificate, or § 365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application<br>Number(s) | Country | Foreign Filing Date<br>(MM/DD/YYYY) | Priority<br>Not Claimed  | Certified Copy Attached? |                          |
|----------------------------------------|---------|-------------------------------------|--------------------------|--------------------------|--------------------------|
|                                        |         |                                     |                          | YES                      | NO                       |
|                                        |         |                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                        |         |                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                        |         |                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                        |         |                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                        |         |                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below.

| Application Number(s) | Filing Date (MM/DD/YYYY) | <input type="checkbox"/> Additional provisional<br>application numbers are<br>listed on a supplemental<br>sheet attached hereto. |
|-----------------------|--------------------------|----------------------------------------------------------------------------------------------------------------------------------|
|                       |                          |                                                                                                                                  |

|                    |               |
|--------------------|---------------|
| <b>DECLARATION</b> | <b>Page 2</b> |
|--------------------|---------------|

I hereby claim the benefit under Title 35, United States Code § 120 of any United States application(s), or § 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

| U.S. Parent Application Number | PCT Parent Number | Parent Filing Date (MM/DD/YYYY) | Parent Patent Number (if applicable) |
|--------------------------------|-------------------|---------------------------------|--------------------------------------|
|                                |                   |                                 |                                      |

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

| Name                                      | Registration Number            | Name | Registration Number |
|-------------------------------------------|--------------------------------|------|---------------------|
| <b>Dana Rao</b><br><b>Robert R. Sachs</b> | <b>43,875</b><br><b>42,120</b> |      |                     |

☐ Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

Please direct all correspondence to:


**Dana S. Rao**  
**Fenwick & West LLP**  
**Two Palo Alto Square**  
**Palo Alto, CA 94306**  
**U.S.A.**

|           |                |     |                |
|-----------|----------------|-----|----------------|
| Telephone | (650) 858-7816 | Fax | (650) 494-1417 |
|-----------|----------------|-----|----------------|

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**Name of Sole or First Inventor:** ☐ A petition has been filed for this unsigned inventor

|            |                |                |           |             |                |                 |  |
|------------|----------------|----------------|-----------|-------------|----------------|-----------------|--|
| Given Name | <b>Richard</b> | Middle Initial | <b>W.</b> | Family Name | <b>Friesen</b> | Suffix e.g. Jr. |  |
|------------|----------------|----------------|-----------|-------------|----------------|-----------------|--|

|                      |                                                                                     |      |                |
|----------------------|-------------------------------------------------------------------------------------|------|----------------|
| Inventor's Signature |  | Date | <b>5/20/99</b> |
|----------------------|-------------------------------------------------------------------------------------|------|----------------|

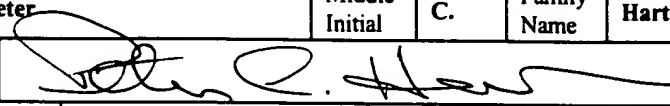
|                 |                |       |           |         |               |             |               |
|-----------------|----------------|-------|-----------|---------|---------------|-------------|---------------|
| Residence: City | <b>Fairfax</b> | State | <b>CA</b> | Country | <b>U.S.A.</b> | Citizenship | <b>U.S.A.</b> |
|-----------------|----------------|-------|-----------|---------|---------------|-------------|---------------|

|                 |  |
|-----------------|--|
| Mailing Address |  |
|-----------------|--|

|                 |                       |
|-----------------|-----------------------|
| Mailing Address | <b>132 Ridge Road</b> |
|-----------------|-----------------------|

|      |                |       |           |     |              |         |               |
|------|----------------|-------|-----------|-----|--------------|---------|---------------|
| City | <b>Fairfax</b> | State | <b>CA</b> | Zip | <b>94930</b> | Country | <b>U.S.A.</b> |
|------|----------------|-------|-----------|-----|--------------|---------|---------------|

☒ Additional inventors are being named on supplemental sheet(s) attached hereto

| DECLARATION                                       |                                                                                    |                |    | ADDITIONAL INVENTOR(S)<br>Supplemental Sheet                                  |        |                 |          |
|---------------------------------------------------|------------------------------------------------------------------------------------|----------------|----|-------------------------------------------------------------------------------|--------|-----------------|----------|
| <b>Name of Additional Joint Inventor, if any:</b> |                                                                                    |                |    | <input type="checkbox"/> A petition has been filed for this unsigned inventor |        |                 |          |
| Given Name                                        | Peter                                                                              | Middle Initial | C. | Family Name                                                                   | Hart   | Suffix e.g. Jr. |          |
| Inventor's Signature                              |  |                |    |                                                                               | Date   | May 25, 1999    |          |
| Residence: City                                   | San Rafael                                                                         | State          | CA | Country                                                                       | U.S.A. | Citizenship     | Canadian |
| Mailing Address                                   | 53 Oakdale Avenue                                                                  |                |    |                                                                               |        |                 |          |
| Mailing Address                                   |                                                                                    |                |    |                                                                               |        |                 |          |
| City                                              | San Rafael                                                                         | State          | CA | Zip                                                                           | 94901  | Country         | U.S.A.   |

|                                                   |  |                |  |                                                                               |      |                 |  |
|---------------------------------------------------|--|----------------|--|-------------------------------------------------------------------------------|------|-----------------|--|
| <b>Name of Additional Joint Inventor, if any:</b> |  |                |  | <input type="checkbox"/> A petition has been filed for this unsigned inventor |      |                 |  |
| Given Name                                        |  | Middle Initial |  | Family Name                                                                   |      | Suffix e.g. Jr. |  |
| Inventor's Signature                              |  |                |  |                                                                               | Date |                 |  |
| Residence: City                                   |  | State          |  | Country                                                                       |      | Citizenship     |  |
| Mailing Address                                   |  |                |  |                                                                               |      |                 |  |
| Mailing Address                                   |  |                |  |                                                                               |      |                 |  |
| City                                              |  | State          |  | Zip                                                                           |      | Country         |  |

|                                                   |  |                |  |                                                                               |      |                 |  |
|---------------------------------------------------|--|----------------|--|-------------------------------------------------------------------------------|------|-----------------|--|
| <b>Name of Additional Joint Inventor, if any:</b> |  |                |  | <input type="checkbox"/> A petition has been filed for this unsigned inventor |      |                 |  |
| Given Name                                        |  | Middle Initial |  | Family Name                                                                   |      | Suffix e.g. Jr. |  |
| Inventor's Signature                              |  |                |  |                                                                               | Date |                 |  |
| Residence: City                                   |  | State          |  | Country                                                                       |      | Citizenship     |  |
| Mailing Address                                   |  |                |  |                                                                               |      |                 |  |
| Mailing Address                                   |  |                |  |                                                                               |      |                 |  |
| City                                              |  | State          |  | Zip                                                                           |      | Country         |  |

|                                                                                                        |  |                |  |                                                                               |      |                 |  |
|--------------------------------------------------------------------------------------------------------|--|----------------|--|-------------------------------------------------------------------------------|------|-----------------|--|
| <b>Name of Additional Joint Inventor, if any:</b>                                                      |  |                |  | <input type="checkbox"/> A petition has been filed for this unsigned inventor |      |                 |  |
| Given Name                                                                                             |  | Middle Initial |  | Family Name                                                                   |      | Suffix e.g. Jr. |  |
| Inventor's Signature                                                                                   |  |                |  |                                                                               | Date |                 |  |
| Residence: City                                                                                        |  | State          |  | Country                                                                       |      | Citizenship     |  |
| Mailing Address                                                                                        |  |                |  |                                                                               |      |                 |  |
| Mailing Address                                                                                        |  |                |  |                                                                               |      |                 |  |
| City                                                                                                   |  | State          |  | Zip                                                                           |      | Country         |  |
| <input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto |  |                |  |                                                                               |      |                 |  |

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